#### Application Data She t

#### **Application Information**

Application Type:: Regular Subject Matter:: Utility

Title Line One:: MOLDED CLOSURE AND

Title Line Two::

APPARATUS FOR MAKING SAME

Attorney Docket Number:: CG-851D

Request for Early Publication?::

Request for Non-Publication?::

No
Small Entity?::

No

#### Applicant Information

Applicant Authority Type:: Inventor Primary Citizenship Country:: U.S.

Status:: Full Capacity

Given Name:: James Middle Name:: A.

Family Name:: Francois
City of Residence:: Evansville
State or Province of Residence:: Indiana

Country of Residence:: US

Street of mailing address: 2920 Nicole Drive

City of mailing address::

State or Province of mailing address:

Country of mailing address::

US

Postal or Zip Code of mailing address:: 47711

Applicant Authority Type:: Inventor Primary Citizenship Country:: U.S.

Status:: Full Capacity

Given Name:: Kerry
Middle Name:: W.
Family Name:: Dodds
City of Residence:: Gentryville
State or Province of Residence:: Indiana

State or Province of Residence:: Indiana
Country of Residence:: US

Street of mailing address: 795 East County Road 1500 North

City of mailing address:: Gentryville State or Province of mailing address: Indiana

Country of mailing address::

US

Postal or Zip Code of mailing address::

47537

# **Correspondence Information**

Correspondence Customer Number::

27868

Name::

John F. Salazar

Street of mailing address::

2500 Brown & Williamson Tower

City of mailing address::

Louisville

State or Province of mailing address::

Kentucky

Country of mailing address::

US 40202

Postal or Zip Code of mailing address:: Phone number::

(502) 584-1135

Fax number::

(502) 561-0442

E-Mail address::

jsalazar@middreut.com

# Representative Information

Representative Customer Number::

27868

# **Domestic Priority Information**

Application::

This Application

Continuity Type::

is a Divisional of

Parent Application:: Parent Filing Date::

09/790,128 02/21/01

# **Assignment Information**

Assignee Name::

Rexam Medical Packaging Inc.

Street of mailing address::

3245 Kansas Road

City of mailing address::

Evansville

State or Province of mailing address::

Indiana

Country of mailing address::

US

Postal or Zip Code of mailing address::

47711